PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

Application or Docket Number

10691143

CLAIMS AS FILED - PART I (Column 1)						(Column 2)		SMALL ENTITY TYPE		OR	OTHER THAN	
TOTAL CLAIMS			20				- 1	RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
ΤC	ITAL CHARGE	BLE CLAIMS	20 minus 20=		•			X\$ 9=		OR	X\$18=	
	EPENDENT C		3 minus 3 =					X43=		OR	X86=	
MULTIPLE DEPENDENT CLAIM PRESENT								+145≖		OR	+290=	
* If the difference in column 1 is less than zero, enter					"0" in c	olumn 2	•	TOTAL		OR	TOTAL	770
,	_	LAIMS AS A	- PAR	PART II						OTHER THAN		
	echen	(Column 1)	(Columi HIGHE			(Column 3)	1 ,	SMALL		OR	SMALL	
AMENDMENTA	8.38 D	CLAIMS REMAINING AFTER AMENDMENT		NLIME PREVIO PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· 20	Minus		90	- /		X\$ 9=		OR	X\$18=	
AME	Independent	* 3	Minus		CI AIM	- /		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	
1,19,20 1/11/							7	TOTAL ADOIT, FEE		OR	TOTAL ADDIT, FEE	
///3/05 (Column 1) 8/3/05 (Column 2) (Column							_					
AMENDMENT B	<i>)</i>	CLAIMS REMAINING AFTER AMENDMENT	, ,	HIGHI NUME PREVIO PAID I	SER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· 2/)	Minus	- 6	10	=		X\$ 9=		OR	X\$18=	
	Independent	• /	Minus	***				X43=		OR	X86=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						'	+145=		OR	+290=	
								TOTAL DOT, FEE		OR	TOTAL	
							•					
ENTC		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column Highe NUME PREVIO PAID F	IST IER USLY	(Column 3) PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDM	Total	•	Minus	*		=		X\$ 9=		OR	X\$18=	
E	Independent	*	Minus	-		•	lt	X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-	+145=		UR		
• •	* If the entry in column 1 is less than the entry in column 2, write "O" in column 3.									OR	+290=	
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE OR ADDIT. FEE OR ADDIT. FEE												
		ber Previously Pak					er four	nd in the app	ropriate box	in cob	umn 1.	
FORM	FORM PTO-875 (Rev. 1903) Patient and Trademath Otice, U.S. DEPARTMENT OF COMMERCE											